## State of Indiana 2012 Rates

Plan	Coverage	Biweekly Employee Rate	Biweekly Employer Rate	Biweekly Total Rate	Early Retirees (Monthly)	COBRA (Monthly)	Annual Employee Rate	Annual Employer Rate	Annual Employer HSA Contribution	Total Annual Employer Contribution	Annual Total Rate
CDHP 1	Single	\$30.67	\$153.35	\$184.02	\$398.71	\$406.68	<i>\$797.42</i>	\$3,987.10	\$1,123.20	\$5,110.30	\$5,907.72
	Family	\$40.82	\$482.92	\$523.74	\$1,134.77	\$1,157.47	\$1,061.32	\$12,555.92	\$2,249.52	\$14,805.44	\$15,866.76
CDHP 1	Single	\$5.67	\$153.35	\$159.02	\$344.54	\$351.43	\$147.42	\$3,987.10	\$1,123.20	\$5,110.30	\$5,257.72
W/ Non-Tobacco Use Incentive	Family	\$15.82	\$482.92	\$498.74	\$1,080.60	\$1,102.21	\$411.32	\$12,555.92	\$2,249.52	\$14,805.44	\$15,216.76
CDHP 2	Single	\$55.51	\$170.63	\$226.14	\$489.97	\$499.77	\$1,443.26	\$4,436.38	\$673.92	\$5,110.30	\$6,553.56
	Family	\$110.90	\$517.60	\$628.50	\$1,361.75	\$1,388.99	\$2,883.40	\$13,457.60	\$1,347.84	\$14,805.44	\$17,688.84
CDHP 2	Single	\$30.51	\$170.63	\$201.14	\$435.80	\$444.52	\$793.26	\$4,436.38	\$673.92	\$5,110.30	\$5,903.56
W/ Non-Tobacco Use Incentive	Family	\$85.90	\$517.60	\$603.50	\$1,307.58	\$1,333.73	\$2,233.40	\$13,457.60	\$1,347.84	\$14,805.44	\$17,038.84
Traditional PPO	Single	\$151.27	\$196.55	\$347.82	\$753.61	\$768.68	\$3,933.02	\$5,110.30	\$0.00	\$5,110.30	\$9,043.32
	Family	\$376.40	\$569.44	\$945.84	\$2,049.32	\$2,090.31	\$9,786.40	\$14,805.44	\$0.00	\$14,805.44	\$24,591.84
Traditional PPO	Single	\$126.27	\$196.55	\$322.82	\$699.44	\$713.43	\$3,283.02	\$5,110.30	\$0.00	\$5,110.30	\$8,393.32
W/ Non-Tobacco Use Incentive	Family	\$351.40	\$569.44	\$920.84	\$1,995.15	\$2,035.05	\$9,136.40	\$14,805.44	\$0.00	\$14,805.44	\$23,941.84
Dental	Single	\$1.20	\$10.02	\$11.22	\$24.31	\$24.80	\$31.20	\$260.52	\$0.00	\$260.52	\$291.72
	Family	\$3.16	\$26.36	\$29.52	\$63.96	\$65.24	\$82.16	\$685.36	\$0.00	\$685.36	\$767.52
Vision	Single	\$0.17	\$1.47	\$1.64	\$3.55	\$3.62	\$4.42	\$38.22	\$0.00	\$38.22	\$42.64
	Family	\$2.52	\$1.64	\$4.16	\$9.01	\$9.19	\$65.52	\$42.64	\$0.00	\$42.64	\$108.16
Flexible Spending Accounts											
Medical, Limited Purpose Medical (HSA Holders)		\$2.00	\$0.00	\$2.00	\$4.33	\$4.33	\$52.00	\$0.00	\$0.00	\$0.00	\$52.00

HSA Accounts	Coverage	Initial Contribution *	Biweekly Contribution	Monthly Contribution	Maximum Annual ER Contribution
HSA 1	Single	\$561.60	\$21.60	\$46.80	\$1,123.20
	Family	\$1,124.76	\$43.26	\$93.73	\$2,249.52
HSA 2	Single	\$336.96	\$12.96	\$28.08	\$673.92
	Family	\$673.92	\$25.92	\$56.16	\$1,347.84

<sup>\*</sup>Initial contribution as listed above apply to employees with a CDHP effective between 1/1/12 thru 6/1/12 and with an open HSA. CDHPs effective after 6/1/12 but before 12/1/12 and with an open HSA, will receive 1/2 of the initial contribution.

and/or Dependent Care Admin Fee

Employees participating in CDHPs are reminded that they must open an HSA in order to receive the state's HSA contribution or the bank will charge a set-up fee.